



U.S. Department of Transportation
Research and Special Programs
Administration

INCIDENT REPORT - GAS DISTRIBUTION SYSTEM

Report Date _____

No. _____
(RSPA)

PART 1 - GENERAL REPORT INFORMATION

SEE INSTRUCTIONS

1. a. Operator's 5 digit Identification Number

____/____/____/____/____

b. Name of Operator _____

c. _____

Number and Street

d. _____

City, County, State and Zip Code

2. Location of incident

a. _____

Number and Street

b. _____

City and County

c. _____

State and Zip Code

d. Class location ☐ 1 ☐ 2 ☐ 3 ☐ 4

e. Incident on Federal land ☐ Yes ☐ No

3. Time and date of incident

____/____/____/____/____ hr. ____/____/____ mo. ____/____/____ day
____/____/____ yr.

4. Reason for reporting

☐ Fatality Number ____/____/____/____/____ persons

☐ Injury requiring inpatient
hospitalization Number ____/____/____/____/____ persons

☐ Property damage/loss Estimate \$ _____

☐ Operator judgment/emergency action

☐ Supplemental Report

5. Elapsed time until area

was made safe ____/____/____ hr. ____/____/____ min.

6. Telephone Report

____/____/____ mo. ____/____/____ day ____/____/____ yr.

7. a. Estimated pressure at point and time of incident (PSIG) _____

b. Maximum allowable operating pressure (MAOP)(PSIG) _____

c. MAOP established by:

(1) Test pressure ____ (PSIG)

(2) 49 CFR § 192.619 (a)(3) ☐

PART 2 - APPARENT CAUSE

☐ Corrosion

(Continue in Part A)

☐ Damage by Outside Forces

(Continue in Part B)

☐ Construction/Operating error

(Continue in Part C)

☐ Other _____

☐ Accidentally caused by operator

(Continue in Parts B and/or C)

PART 3 - NARRATIVE DESCRIPTION OF FACTORS CONTRIBUTING TO THE INCIDENT

(Attach additional sheet(s) as necessary)

PART 4 - ORIGIN OF THE INCIDENT

1. Part of system where incident occurred

☐ Main

☐ Meter Set Assembly

☐ Service Line

☐ Other _____

3. Material involved:

☐ Steel

☐ Cast iron

☐ Polyethylene plastic

☐ Other plastic: _____

☐ Other _____

Nominal pipe size (NPS) ____/____/____/____/____ in.

2. Component which failed

a. Part

☐ Body of pipe

☐ Valve

☐ Joint type

☐ Regulator/meter

☐ Fitting

☐ Weld(Specify) _____
(girth, longitudinal, fillet)

☐ Drip/Riser

☐ Other _____

Wall thickness ____/____/____/____/____ in.

4. Specification _____ Manufacturer _____ Yr Manufactured ____/____/____/____/____ Yr Installed ____/____/____/____/____

PART 5 - ENVIRONMENT

Area of Incident

☐ Within/Under bldg

☐ Under pavement

☐ Above ground

☐ Under ground or Under water

☐ Other _____

PART 6 - PREPARER AND AUTHORIZED SIGNATURE

(type or print) Preparer's Name and Title

Area Code and Telephone Number

Authorized Signature

Date

Area Code and Telephone Number